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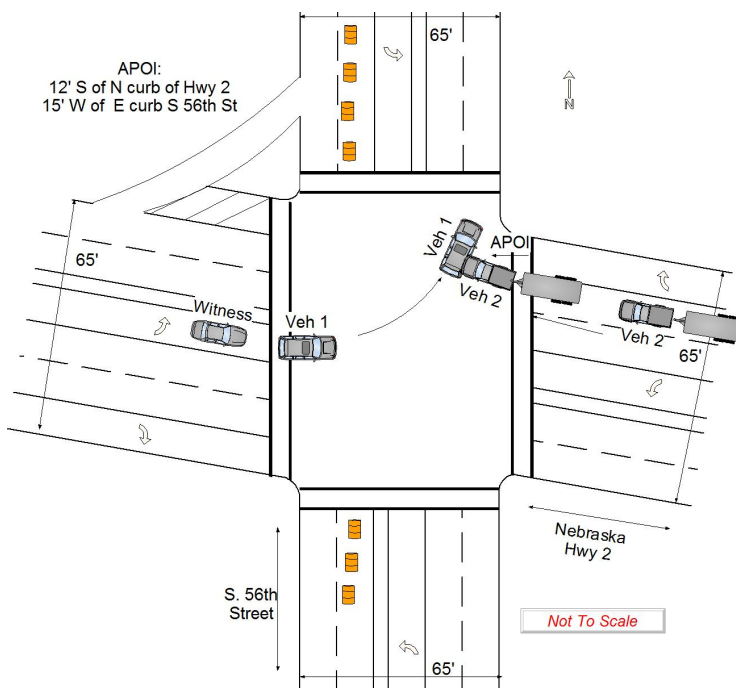
State of Nebraska
Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 180	Agency Case No. B5-086331	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1
A/1	DATE OF ACCIDENT	M M / D D / Y Y Y Y S M T W T H F S 09/17/2015		TIME OF ACCIDENT 1602	STATE USE ONLY	
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 1603	09/17/2015	
B	82	ROAD ON WHICH ACCIDENT OCCURRED STREET/ HIGHWAY NO. S 56th St / Hwy 2		PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	LATITUDE	
C	1	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO. 2	LONGITUDE
D	1	IF AT INTERSECTION NAME OF INTERSECTING ROADWAY S 56th St / Hwy 2		IF NOT AT INTERSECTION NAME OF NEAREST STREET, BRIDGE, RAILROAD CROSSING		
V1/M	02	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN				
V2/M	03	MILES	N S E W	AND MILES	N S E W	OF NEAREST CITY OR TOWN
E	2	R. WORK ZONE CODES R1 3 R2 1 R3 1 R4 2	S. PEDESTRIAN CLASSIFICATION CODES S1 S2 S3 S4 S5-a S5-b S6-a S6-b		DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
VEHICLE NO. 1						
F	1	DRIVER LICENSE NO. G09023963	STATE (Of License) NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE		
V1/N	2	DRIVER BRYON T STREEKS	PHONE 4024997134	LOCAL NO.		
V2/N	2	DRIVER ADDRESS 2521 DEVONSHIRE DR, LINCOLN, NE 68506	CITY, STATE, ZIP	DATE OF BIRTH (MM / DD / YYYY) 08/21/1968	LOCAL NO.	
G	4	OWNER BRYON STREEKS	PHONE 4024997134	LOCAL NO.		
H	2	OWNER ADDRESS 2521 DEVONSHIRE DR, LINCOLN, NE 68506	CITY, STATE, ZIP	CITATION <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO. LB483335	
V1/O	4	LICENSE PLATE PA NO. SLB690	YEAR 2016	STATE (Of Plate) NE		
V2/O	4	VEHICLE 2004	MAKE Chevrolet	MODEL Suburban	BODY STYLE Medium/large	COLOR red
V1/O	4	VEHICLE ID NO. (VIN) 1GNFK16Z04J259448	ESTIMATED DAMAGE <input checked="" type="radio"/> TOALED \$		INSURANCE COMPANY State Farm	
V2/O	4	TOWED TO 101 Charleston	TOWED BY Capital Towing	POLICY NO. 071 0176-F09-27A		
VEHICLE NO. 2						
I	1	DRIVER LICENSE NO. H13062355	STATE (Of License) NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE		
V1/P	1	DRIVER PATRICK M WOLFING	PHONE 4028052662	LOCAL NO.		
V2/P	3	DRIVER ADDRESS 2907 Candlewood Ln, LINCOLN, NE 68521	CITY, STATE, ZIP	DATE OF BIRTH (MM / DD / YYYY) 05/31/1988	LOCAL NO.	
J	01	OWNER TDK LAWN CARE INC	PHONE 4024408265	LOCAL NO.		
V1/Q	1	OWNER ADDRESS 1600 VAN DORN ST, LINCOLN, NE 68502	CITY, STATE, ZIP	CITATION <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO. LB483336	
V2/Q	1	LICENSE PLATE TE NO. SSP724	YEAR 1995	STATE (Of Plate) NE		
V2/Q	1	VEHICLE 1995	MAKE Ford	MODEL F150	BODY STYLE Pickup truck	COLOR red
V2/Q	1	VEHICLE ID NO. (VIN) 1FTEF14Y5SLB46633	ESTIMATED DAMAGE <input checked="" type="radio"/> TOALED \$		INSURANCE COMPANY Auto Owners Ins Co	
K	02	TOWED TO 1342 High St	TOWED BY Capital Towing	POLICY NO. 4775954400		
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)						
VEH. #	2	NAME PATRICK M WOLFING	ADDRESS 2907 Candlewood Ln, Lincoln, NE 68521	DATE OF BIRTH (MM / DD / YYYY) 05/31/1988	1 01	2 1
		LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME	3 07	4 3
					5 1	SEX M
VEH. #	2	NAME Richard Winter	ADDRESS 1917 J St, Lincoln, NE 68510	DATE OF BIRTH (MM / DD / YYYY) 10/01/1992	1 03	2 1
		LOCAL NO.	MEDICAL FACILITY NAME BryanLGH Medical Center West (Lincoln General)	EMS SERVICE NAME Lincoln Fire & Rescue	3 07	4 2
					5 2	SEX M
VEH. #		NAME	ADDRESS	DATE OF BIRTH (MM / DD / YYYY)	1	2
		LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME	3	4
					5	SEX

INDICATE BY DIAGRAM WHAT HAPPENED

Indicate North by Arrow



D2 reported he was WB on Hwy 2 approaching S 56th St when the light turned to yellow. D2 reported he traveled into the intersection at approx. 45-55mph and collided with V1 which turned in front of him. D2 said he applied his brakes and swerved to the right in an attempt to avoid the collision with no success. D1 reported he was EB on Hwy 2 in the turn lane to turn NB onto S 56th St. D1 said his light turned red while waiting in the intersection to clear WB traffic and a car in the inside lane stopped. D1 said he began to turn and was struck by V2. Witness reported he was behind V1 which was waiting in the intersection to turn NB onto S 56th St. Witness said the light turned red and V1 turned NB when V2 violated the red light WB and collided with V1. Ofc. observed the traffic signals for the turn lane and WB traffic to turn red at the same time.

PROPERTY	OBJECT DAMAGED				OWNER NAME Toro Comercial 21" TDK Lawn Care Inc 1600 Van Dorn, Lincoln, NE 68502										PHONE 4024408265				APPROX. COST OF DAMAGE \$ 1300																																																																																									
	OBJECT DAMAGED Toro Turf Master 30				OWNER NAME TDK Lawn Care Inc 1600 Van Dorn, Lincoln, NE 68502										PHONE 4024408265				APPROX. COST OF DAMAGE \$ 1900																																																																																									
WITNESSES	NAME Roger Irwin 7620 Otoe Cr, Lincoln, NE 68506										ADDRESS 										PHONE 4023096242																																																																																							
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VEHICLE MOVEMENT BEFORE COLLISION															POINT OF IMPACT AND MOST DAMAGED AREA <i>(Enter numbers for each vehicle)</i>										AIRBAG DEPLOYED VEHICLE 1						RESTRAINT USE VEHICLE 1						TOTAL OCCUPANTS		VEH 1	1	VEH 2	2																																																																		
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INVESTIGATOR NAME <i>(Print or Type)</i> Trevor Schmidt										INVESTIGATOR SIGNATURE Approved by Officer Trevor Schmidt										DATE OF REPORT 09/17/2015																																																																																								